U.S. Priest and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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PATENT APPLICATION FEE DETERMINATION RECORD

Application of information unless a displays a valid QUB control number.

Application of the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless a displays a valid QUB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Application of the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless a display a valid QUB control number. Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY (Column 2) OR SMALL ENTITY NUMBER FILED NUMBER EXTRA RATE BASIC FEE FFF RATE P7 CFR 1.16(a)) OR TOTAL CLAIMS D7 CFR.1.16(c)) wprn 50 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) OR X S MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR if the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL CLAIMS AS AMENDED - PART II OTHER THAN Acatumn 1) (Column 2) (Column 3) OR SMALL ENTITY SMALL ENTITY CLAMS HIGHEST REMAINING. PRESENT. MUMBER RATE ENT ADDI RÀTE AFTER ADDI-PREVIOUSLY EXTRA UY TIONAL MENDMENT PADEOR FEE Folai FEE ENDM OF OFR 1.14(c) <u>×4</u>50 OR Independent OF CFR 1,1603)OC OR FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.18(4)) 1180 +:360 OR TOTAL TOTAL ADD'L FEE ADD'L FEE (Column 1) (Column 2) CLAMS HIGHEST œ REMAINING PRESENT NUMBER RATE ADDL ENDMENT RATE AFTER ADOL EXTRA TIONAL PAID FOR Total CF CFR LIKE Hirus Æ 50 Independent OF CFR 1.16(c) OR 100OR FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) +.18Q +:360 OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAMS HIGHEST NUMBER PRESENT RATE AMENDMENT ADDL RATE AFTER PREVIOUSLY ADDI **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE Total CFR 1.15(d) OR Minus 100 FRST PRESENTATION OF MATIPLE DEPONDENT CLAIM D7 OFR 1.1600) . 36C TOTAL ADO'L FEE If the entry in column 1 is less than the entry is column 2, write, "U, in options 3.

If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. ADD'L FEE

· APRIMITATION CONTRACTOR

This collection of information is required by 37 CFR 1.16. The info This collection of Information is required by 3F CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including pathering, peoparing, and submitting the completed application form to the USPTO. Tame will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient Trademark, Office, U.S. Department of Commerce, P.O. 80x 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: